

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Human Rights Campaign PAC

ADDRESS (number and street)

1640 Rhode Island Ave NW

☐Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00235853

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2010

through

01

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. James M. Rinefierd

Signature of Treasurer

Electronically Filed by Mr. James M. Rinefierd

Date

02

18

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
Human Rights Campaign PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 | 2010 | 208138.11 |
| (b) Cash on Hand at Beginning of Reporting Period | 208138.11 | |
| (c) Total Receipts (from Line 19) | 35501.64 | 35501.64 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 243639.75 | 243639.75 |
| 7. Total Disbursements (from Line 31) | 5069.93 | 5069.93 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 238569.82 | 238569.82 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Human Rights Campaign PAC

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 1 0

To:

M M
0 1D D
3 1Y Y Y Y
2 0 1 0

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 6493.00 | 6493.00 |
| (ii) Unitemized | 29001.43 | 29001.43 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 35494.43 | 35494.43 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 35494.43 | 35494.43 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 7.21 | 7.21 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 35501.64 | 35501.64 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 35501.64 | 35501.64 |

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| (i) Federal Share..... | 0.00 | 0.00 | |
| (ii) Non-Federal Share..... | 0.00 | 0.00 | |
| (b) Other Federal Operating Expenditures..... | -2824.02 | -2824.02 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤ | -2824.02 | -2824.02 | |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 5000.00 | 5000.00 | |
| 24. Independent Expenditure (use Schedule E) | 2893.95 | 2893.95 | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 | |
| 26. Loan Repayments Made..... | 0.00 | 0.00 | |
| 27. Loans Made..... | 0.00 | 0.00 | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | |
| (b) Political Party Committees | 0.00 | 0.00 | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 | |
| 29. Other Disbursements..... | 0.00 | 0.00 | |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | 0.00 | 0.00 | |
| (ii) "Levin" Share | 0.00 | 0.00 | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 5069.93 | 5069.93 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5069.93 | 5069.93 | |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 35494.43 | 35494.43 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 35494.43 | 35494.43 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | -2824.02 | -2824.02 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | -2824.02 | -2824.02 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Rhonda L. Berchuck

Mailing Address 320 Wayland Ave Apt 3

City

Providence

State

RI

Zip Code

02906-4537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fidelity Investments

Occupation

Vice President, Creative Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285615

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Stephen H. Carter

Mailing Address 2450 NE 135th Street, Unit 905

City

North Miami

State

FL

Zip Code

33181-3535

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Airlines

Occupation

Flight Attendant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285583

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Steven Caufield

Mailing Address 3119 Cedarplaza Ln Apt 301

City

Dallas

State

TX

Zip Code

75235-8594

FEC ID number of contributing
federal political committee.

C

Name of Employer
Munsch Hardt Kopf & Harr,
P.C.

Occupation

Real estate attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285513

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Hugh H. Crawford, MD

Mailing Address PO Box 1942

City

Palm Springs

State

CA

Zip Code

92263-1942

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285675

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Stuart A. Friedman

Mailing Address 13708 Ardoon Ave

City

Cleveland

State

OH

Zip Code

44120-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cuyahoga County

Occupation

Judge

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285719

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

David Earl Green

Mailing Address PO Box 45350

City

Madison

State

WI

Zip Code

53744-5350

FEC ID number of contributing
federal political committee.

C

Name of Employer
USGS

Occupation

Veterinary Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 1 0

Transaction ID: C4285519

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

840.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Melissa Hines

Mailing Address 7720 Grace Drive

City

North Richland Hil

State

TX

Zip Code

76182-7521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Verizon Wireless

Occupation

Inventory Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 9 / 2 0 1 0

Transaction ID: C4285770

Amount of Each Receipt this Period

1200.00

B.

Full Name (Last, First, Middle Initial)

Christine A. Koehler

Mailing Address 3983 Brockett Walk

City

Tucker

State

GA

Zip Code

30084-6402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Koehler and Riddick

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285659

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Robert R. McCrae

Mailing Address 809 Evesham Ave

City

Baltimore

State

MD

Zip Code

21212-3202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired from National Institute on Agi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 1 0

Transaction ID: C4285520

Amount of Each Receipt this Period

245.00

SUBTOTAL of Receipts This Page (optional)

1745.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Brad A Myers

Mailing Address 4528 Olentangy Blvd

City

Columbus

State

OH

Zip Code

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio State University

Occupation

University Registrar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285500

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

John Reed Payne

Mailing Address PO Box 9002

City

Brownsville

State

TX

Zip Code

78520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Commercial Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285588

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

J. Christophe Pilley

Mailing Address 421 Richland Avenue

City

Baton Rouge

State

LA

Zip Code

70806-5260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285674

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Jonathan Pizer

Mailing Address 551 W Stratford Pl

City

Chicago

State

IL

Zip Code

60657-2629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Central Merchandising, In-
c.

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285531

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mirian Saez

Mailing Address 4201 22nd Street

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing
federal political committee.

C

Name of Employer
City & County of San Fran-
cisco

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285755

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)

Craig H. Sannum

Mailing Address 31511 West Street

City

Laguna Beach

State

CA

Zip Code

92651-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Korsan Management Services

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285584

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

808.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 11 / 17

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Peter M. Tortorello

Mailing Address 401 N Wabash Ave Unit 65c

City

Chicago

State

IL

Zip Code

60611-3840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Koenig & Strey

Occupation

Broker Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285702

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Tambria Turco

Mailing Address 5523 Feather Ct

City

Castro Valley

State

CA

Zip Code

94552-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer
Covenant Care LLC

Occupation

Director of Clinical Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285614

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Harry A. Zinn

Mailing Address 942 14th St Apt 5

City

Santa Monica

State

CA

Zip Code

90403-3141

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bate, Peterson, Deacon,
Zinn & Young L

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: C4285528

Amount of Each Receipt this Period

450.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

6493.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Human Rights Campaign PAC

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address 12138 Central Ave # 886</p> <p>City Mitchellville State MD Zip Code 20721-1910</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D293717 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>9.43</div> </p> |
| <p>B. Full Name (Last, First, Middle Initial) CyberSource Corp</p> <p>Mailing Address 1295 Charleston Rd</p> <p>City Mountain View State CA Zip Code 94043-1307</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D293718 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>50.00</div> </p> |
| <p>C. Full Name (Last, First, Middle Initial) Human Rights Campaign</p> <p>Mailing Address 1640 Rhode Island Ave NW</p> <p>City Washington State DC Zip Code 20036-3200</p> <p>Purpose of Disbursement draw 1/18/10 adv from line 24</p> <p>Candidate Name Human Rights Campaign</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special</p> | <p>Transaction ID: D289676 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>-690.56</div> </p> |

SUBTOTAL of Disbursements This Page (optional)

-631.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 17

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)
Human Rights Campaign

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

Purpose of Disbursement
draw 1/18/10 adv from line 24

Candidate Name
Human Rights Campaign

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Special

State: District:

Transaction ID: D289678

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-736.28

B.

Full Name (Last, First, Middle Initial)
Human Rights Campaign

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

Purpose of Disbursement
draw 1/18/10 adv from line 24

Candidate Name
Human Rights Campaign

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Special

State: District:

Transaction ID: D289680

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-1417.11

C.

Full Name (Last, First, Middle Initial)
Human Rights Campaign

Mailing Address 1640 Rhode Island Ave NW

City Washington State DC Zip Code 20036-3200

Purpose of Disbursement
draw 1/13/10 adv from line 24

Candidate Name
Human Rights Campaign

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Special

State: District:

Transaction ID: D289681

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-50.00

SUBTOTAL of Disbursements This Page (optional)

-2203.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)
SunTrust

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement
bank charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D293716

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.50

SUBTOTAL of Disbursements This Page (optional)

10.50

TOTAL This Period (last page this line number only)

-2824.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 / 17

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Human Rights Campaign PAC

A.

Full Name (Last, First, Middle Initial)

Massachusetts Democratic Party

Mailing Address 56 Roland Street North Lobby
Suite 203

City Boston State MA Zip Code 02129

Purpose of Disbursement
ContributionCandidate Name
Massachusetts Democratic PartyCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D287352

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 7 / 2 0 1 0

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 16 / 17

FOR LINE 24 OF FORM 3X

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) Human Rights Campaign PAC | | FEC IDENTIFICATION NUMBER ▼ C C00235853 | |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice | | | |
| Full Name (Last, First, Middle, Initial) of Payee Human Rights Campaign | | Date M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 1 0 | |
| Mailing Address 1640 Rhode Island Ave NW | | Amount 50.00 | |
| City State Zip Code Washington DC 20036-3200 | | Transaction ID: D287452 | |
| Purpose of Expenditure online advocacy | | Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential | |
| Category/Type | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Name of Federal Candidate supported or Opposed by expenditure: Martha Coakley | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special</u> | |
| Calendar Year-To-Date Per Election for Office Sought 2893.95 | | 2010 | |
| Full Name (Last, First, Middle, Initial) of Payee Human Rights Campaign | | Date M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 0 | |
| Mailing Address 1640 Rhode Island Ave NW | | Amount 690.56 | |
| City State Zip Code Washington DC 20036-3200 | | Transaction ID: D289675 | |
| Purpose of Expenditure automated calls staff time and lists | | Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential | |
| Category/Type | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Name of Federal Candidate supported or Opposed by expenditure: Martha Coakley | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special</u> | |
| Calendar Year-To-Date Per Election for Office Sought 2893.95 | | 2010 | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | 740.56 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | |
| (c) TOTAL Independent Expenditures | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Mr. James M. Rinefierd Signature | | Date M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 1 0 | |

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 17 / 17

FOR LINE 24 OF FORM 3X

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) Human Rights Campaign PAC | | FEC IDENTIFICATION NUMBER C C00235853 | |
| Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice | | | |
| Full Name (Last, First, Middle, Initial) of Payee Human Rights Campaign | | Date MM / DD / YYYY 01 / 18 / 2010 | |
| Mailing Address 1640 Rhode Island Ave NW | | Amount 736.28 | |
| City State Zip Code Washington DC 20036-3200 | | Transaction ID: D289677 | |
| Purpose of Expenditure e-mail communications staff time and lists | | Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential | |
| Name of Federal Candidate supported or Opposed by expenditure: Martha Coakley | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 2893.95 | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special 2010 | |
| Full Name (Last, First, Middle, Initial) of Payee Precision Communications | | Date MM / DD / YYYY 01 / 18 / 2010 | |
| Mailing Address 8601 Georgia Ave, #806 | | Amount 1417.11 | |
| City State Zip Code Silver Spring MD 20910 | | Transaction ID: D289679 | |
| Purpose of Expenditure automated calls | | Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential | |
| Name of Federal Candidate supported or Opposed by expenditure: Martha Coakley | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 2893.95 | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special 2010 | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | 2153.39 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | |
| (c) TOTAL Independent Expenditures | | 2893.95 | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| Mr. James M. Rinefierd Signature | | Date MM / DD / YYYY 02 / 18 / 2010 | |